



## summary subcontract reports

Monday, June 12, 2006 | 6:37 pm

### SUMMARY SUBCONTRACT REPORT

2005

#### 1. Type of Plan:

individual

#### 2. DUNS #:

032987476

#### 3. Corporation, Company or Subdivision Covered:

##### a. Vendor Name:

BATTELLE MEMORIAL INSTITUTE

##### b. Vendor Physical Address:

**Street Address:**

902 BATTELLE BLVD

**City:**

RICHLAND

**State:**

Washington

**Zip+4:**

99354

**Country:**

United States

##### c. Vendor Mailing Address:

**Street Address:**

PO Box 999

**City:**

RICHLAND

**State:**

Washington

**Zip+4:**

99352

**Country:**

United States

**4. Date Submitted:**December 20, 2005

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**5. Contact Information:**Andrea Melius

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**6. Reporting Period::**

Oct 1 - Sept 30

**a. Year:**2005

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**7. Agency to which the report is being submitted:**ENERGY, DEPARTMENT OF (8900)

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**8. Contractors Major Products or Service Lines:****a. Product or Service #1:**

Research and Development

**i. NAICS Code # 1:**click [here](#) for description of naics codes541710

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## CUMULATIVE FISCAL YEAR SUBCONTRACT AWARDS

	Whole Dollars	Percent
<b>1a. SMALL BUSINESS CONCERNS</b>	222,801,219	47.7
<b>1b. LARGE BUSINESS CONCERNS</b>	244,148,848	52.3
<b>1c. TOTAL</b>	466,950,067	100

	Whole Dollars	Percent
<b>2. SMALL DISADVANTAGED BUSINESS (SDB) CONCERNS</b>	41,354,653	8.9
<b>3. WOMEN-OWNED SMALL BUSINESS (WOSB) CONCERNS</b>	32,708,048	7
<b>4. HISTORICALLY BLACK COLLEGES AND UNIVERSITIES (HBCU) AND MINORITY INSTITUTIONS (MI)</b>	0	0
<b>5. HUBZone SMALL BUSINESS (HUBZone SB) CONCERNS</b>	23,089,643	4.9
<b>6. VETERAN-OWNED SMALL BUSINESS CONCERNS</b>	19,515,680	4.2
<b>7. SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS CONCERNS</b>	825,847	0.2

**8. Remarks:**

Dollars are cumulative from last contract extension in FY-2003 through FY-2005.

**9. Contractors Official Who Administers Subcontracting Program:****a. Name:**

Andrea R. Melius

**b. Title:**

Small Business Program Manager

**c. Phone Number:**

509-376-3721

**10. Certification:**

Yes

**11. Chief Executive Officer:****a. Name:**

Dr. Len K. Peters

**b. Title:**

Laboratory Director

**c. Date:**

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**12. CEO Approval:**

Yes

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**13. Please enter the email address of the Government employee(s) and/or other person(s) to be notified that you have submitted this report.:**Hopperfh@oro.doe.gov, ronnie.dawson@pnso.science.doe.gov

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